T-295 P.02 F-430 RECEIVED GENTRAL FAX CENTER

JUN 0 2 2004

In re Application of:

Docket No.: 213202.00358

JAMES SAMSO INDAR

Examiner: Maureen Wallenhorst

Application No.: 10/042,258

Group Art Unit: 1743

Filed: January 1 , 2002

Confirmation No.: 6989

For: SAMPLE TAB

Date: June 2, 2004

MAIL STOP FEE AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Corinicate of Pacsimile Transmission I hereby certify that this correspondence is being face the Patent and Trademark Office (FAX No. (703) 250 03

/(Date)

Typed

Sir:

Transmitted herewith is an Amendment in the above-identified application.

図 An additional fee is required.

The fee has been calculated as shown below:

			CL	AIMS AS A	ÆNI	DED_		
	RE	LAIMS MAINING FTER NDMENT		HIGHEST PREVIOUS PAID FO	LY	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS		29	MINUS	26		= 3	x \$ 9 \$18	\$ 27.00
INDEP. CLAIMS		2	MINUS	5		0	x \$43 \$86	\$ 0.00
Fee for Mu	ltiple I	ependent cla	ims \$145°/\$	290			•	
				TOTAL ADI	OITIO	NAL FEE		
				FOR THIS A				\$ 27.00

	Verified Statement claiming small entity status is	enclosed, if not filed previously.
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(Page 1 of 2)

(June 2, 2004)

Doc# WASO1 (213202-00358) +15474x(+1,06/02/2004/Time-20-th

PAGE 2/49 * RCVD AT 6/2/2004 8:38:59 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/0 * DNIS:8729306 * CSID: * DURATION (mm-ss):14-30

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(June 2, 2004)

	A check i : the amount of \$is enclosed.				
\boxtimes	Charge th. amount of \$ 27.00 to Deposit Acc fee. A duplicate copy of this sheet is enclosed.	ount No. 50-1710 to cover the additional claims			
	No. 50-17 0 is hereby revoked. The Commissi additional fees under 37 C.F.R. §§ 1.16 and 1.1	ue fee under 37 C.F.R. § 1.18 to Deposit Account oner is hereby authorized to charge any which may be required during the entire erpayment, to Deposit Account No. 50-1710. A			
	Charge th: amount of \$ to Deposit Accresponse within months. A duplicate co	ount No. 50-1710 to cover the Extension fee for py of this sheet is enclosed.			
\boxtimes	Charge the amount of \$ 180.00 to Deposit According Statement fee. A duplicate copy of the	unt No. 50-1710 to cover the Information his sheet is enclosed.			
\boxtimes	Applicant's undersigned attorney may be reached (202) 625 3500. All correspondence should con-	in our Washington, D.C. office by telephone at tinue to be directed to our below-listed address.			
	Dawn C. H	r Applicant gayes n No. 44,751			
PATENT ADMINISTRATOR KATTEN MUCHIN ZAVIS ROSENMAN 525 West Monroe Street Suite 1600 Chicago, Illinois 50661-3693 Facsimile: (312) 902-1061					
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(Page 2	of 2)	(fune 2, 2004)			

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